

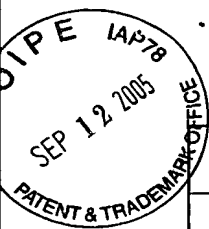


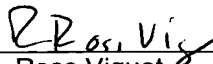
PTO/SB/21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/082,398-Conf. #5850
		Filing Date	February 25, 2002
		First Named Inventor	Salim G. Kara
		Art Unit	3629
		Examiner Name	E. R. Cosimano
Total Number of Pages in This Submission	14	Attorney Docket Number	61135/P004CP1CP1C2/10107404

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	FULBRIGHT & JAWORSKI L.L.P.		
Signature			
Printed name	R. Ross Viguet		
Date	September 12, 2005	Reg. No.	42,203



AMENDMENT TRANSMITTAL LETTER			Docket No. 61135/P004CP1CP1C2/10107404	
Application No. 10/082,398-Conf. #5850	Filing Date February 25, 2002	Examiner E. R. Cosimano	Art Unit 3629	
Applicant(s): Salim G. Kara				
Invention: SYSTEM AND METHOD FOR PRINTING MULTIPLE POSTAGE INDICIA				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	31	- 56 =		x
Independent Claims	4	- 7 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
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<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
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<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 R. Ross Viguet Attorney Reg. No.: 42,203			Dated: <u>September 12, 2005</u>	
FULBRIGHT & JAWORSKI L.L.P. 2200 Ross Avenue, Suite 2800 Dallas, Texas 75201-2784 (214) 855-8185				



Application No.: 10/082,398-Conf. #5850

Attorney Docket No.: 61135/P004CP1CP1C2/10107404

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